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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/835,063	04/16/2001	Focke Rass	225/49847	3891
7590 Crowell & Moring LLP Intellectual Property Group P. O. Box 14300 Washington, DC 20044-4300			EXAMINER ESTREMSKY, GARY WAYNE	
			ART UNIT 3673	PAPER NUMBER
			MAIL DATE 02/06/2008	DELIVERY MODE PAPER

**Please find below and/or attached an Office communication concerning this application or proceeding.**

The time period for reply, if any, is set in the attached communication.




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Board of Patent Appeals and Interferences

Crowell & Moring LLP  
Intellectual Property Group  
P. O. Box 14300  
Washington, DC 20044-4300

Appeal No: 2007-2017  
Appellant: Focke Rass et al.  
Application No: 09/835,063  
Hearing Room: A  
Hearing Docket: B  
Hearing Date: Thursday, March 13, 2008  
Hearing Time: 01:00 PM  
Location: Madison Building - East Wing  
600 Dulany Street, 9th Floor  
Alexandria, Virginia 22313-1450

**NOTICE OF HEARING  
CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS**

Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquiries, please contact the Clerk of the Board at 571-272-9797.

**The application involved in this appeal has been published. Accordingly, the hearing in this appeal is open to the public.**

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED. This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

BPAI HEARINGS FAX No: (571) 273-0299

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CHECK ONE: ( ) HEARING ATTENDANCE CONFIRMED ( ) HEARING ATTENDANCE WAIVED

Signature of Attorney/Agent/Appellant \_\_\_\_\_

Date \_\_\_\_\_

Registration No. \_\_\_\_\_

Names of other visitors expected to accompany counsel: \_\_\_\_\_

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